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CONFIRMATION NO. 1762

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/811,472	<b>FILING OR 371(c) DATE</b> 03/24/2004 <b>RULE</b>	<b>CLASS</b> 714	<b>GROUP ART UNIT</b> 2114	<b>ATTORNEY DOCKET NO.</b> MP.-NR. 01/603
<b>APPLICANTS</b> Gerhard Vollmar, Meckenheim, GERMANY; Zaijun Hu, Ludwigshafen, GERMANY; Pousga Kabore, Schiesheim, GERMANY;				
<b>** CONTINUING DATA *****</b> This application is a CON of PCT/EP02/10705 09/24/2002 ✓				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 101 46 901.2 09/24/2001 ✓				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 06/08/2004</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <u>Allowance</u> <u>MS</u> <u>TMS</u>		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 3
Verified and Acknowledged Examiner's Signature _____ Initials _____	<b>INDEPENDENT CLAIMS</b> 2			
<b>ADDRESS</b> 24131				
<b>TITLE</b> Method and system for processing fault hypotheses				
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	